



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

RQ-3

January 4, 2001

Gilead Kapen, Treasurer
Hoosier Political Action Committee
(Hoosier PAC)
P.O. Box 77089
Washington, DC 20013

Identification Number: C00338848

Reference: Amended July Quarterly Report (4/01/00-6/30/00), dated 7/23/00 and
October Quarterly Report (7/01/00-9/30/00)

Dear Mr. Kapen:

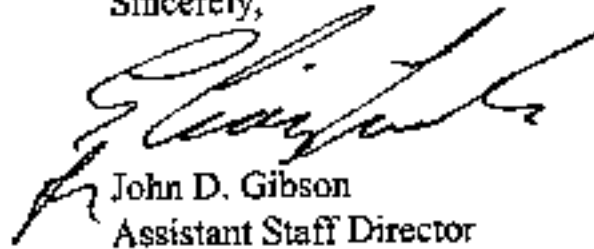
This letter is to inform you that as of January 3, 2001 the Commission has not received your response to our requests for additional information dated December 13, 2000. These notices request information essential to full public disclosure of your federal election campaign finances. To ensure compliance with the provisions of the Federal Election Campaign Act (the Act), please respond to these requests (copies enclosed).

An adequate response must be received at the Commission by January 24, 2001. Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. **Requests for extensions of time in which to respond will not be considered.** Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

If you should have any questions regarding this matter, please contact Erik W. Koeppen on our toll-free number (800) 424-9530 (at the prompt press 1, then press 2 to

reach the Reports Analysis Division) or our local number (202) 694-1130.

Sincerely,

A handwritten signature in dark ink, appearing to read "John D. Gibson", written over the typed name.

John D. Gibson
Assistant Staff Director
Reports Analysis Division

Enclosures



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Gilead Kapen, Treasurer
Hoosier Political Action Committee
(Hoosier PAC)
P.O. Box 77089
Washington, DC 20013

Identification Number: C00338848

DEC 13 2000

Reference: October Quarterly Report (7/01/00-9/30/00)

Dear Mr. Kapen:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) precludes a non-multicandidate political committee and its affiliates, from making a contribution to a candidate for federal office in excess of \$1,000 per election. Please refer to the Campaign Guide for information on how a committee qualifies for multicandidate status.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have made an excessive contribution, you should notify the recipient and request a refund of the amount in excess of \$1,000 and/or notify the recipient in writing of your redesignation of the contribution. In the best interest of your committee, all refunds and redesignations should be made within sixty days of the treasurer's receipt of the contribution(s).

If your committee has met the criteria for multicandidate status, please file FEC FORM 1M "Notification of Multicandidate Status" with the Commission. The treasurer must file FEC FORM 1M prior to making a contribution of more than \$1,000 per candidate per election. 11 CFR §102.2(a)(3)

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund request sent to the recipient committee(s). In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received. Any redesignations should be disclosed as memo entries on Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

Although the Commission may take further legal action regarding the excessive contribution(s), your prompt action in obtaining a refund and/or redesignating the contribution(s) will be taken into consideration.

-The totals listed on Lines 11(a)(i), 11(a)(iii), 11(d), 19, and 30, Column B of the Detailed Summary Page appear to be incorrect. Please be advised that you should add the "Calendar Year-to-Date" total from your previous report to the current "Total This Period" figure from Column A to derive the correct Column B totals. Please amend your report and any subsequent reports that may be affected by this correction.

-Please provide the total(s) for Line 21(b), Column B of the Detailed Summary Page. Note that changes in your figures may affect your Column B totals on this report and/or on subsequent reports.

-Please amend Schedule B supporting Line 23 by providing the office sought for each contribution made. 11 CFR §104.3(b)(3)(ii) and (v)

-For future reporting, please be advised that only contributions to federal candidates and political committees should be itemized on a separate Schedule B supporting Line 23 of the Detailed Summary Page. Contributions to non-federal candidates and committees should be itemized on Schedule B supporting Line 29.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,

Erik W. Koeppen

Erik W. Koeppen
Reports Analyst
Reports Analysis Division

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 2
FOR LINE NUMBER 23

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Hoosier PAC

<p>A. Full Name, Mailing Address and ZIP Code Danny Thompson Memorial Fund P.O. Box 232 Sun Valley ID 83353</p>	<p>Purpose of Disbursement Leukemia Charity Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Donation</p>	<p>Date (month, day, year) 7/20/00</p>	<p>Amount of Each Disbursement This Period \$1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Bilbray for Congress 970 Seacrest Drive #7 Imperial Beach, CA 91932</p>	<p>Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) CA-11</p>	<p>Date (month, day, year) 7/20/00</p>	<p>Amount of Each Disbursement This Period \$1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Rogan for Congress 1464 E. Chevy Chase Dr. #100 Glendale, CA 91206</p>	<p>Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) CA-27</p>	<p>Date (month, day, year) 7/20/00</p>	<p>Amount of Each Disbursement This Period \$1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Rubin for Congress P.O. Box 465 ASHLEY NY 82604</p>	<p>Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) NY-AZ</p>	<p>Date (month, day, year) 7/20/00</p>	<p>Amount of Each Disbursement This Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Mike Pence Committee P.O. Box 408 Anderson, IN 46015</p>	<p>Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) IN-02</p>	<p>Date (month, day, year) 7/26/00</p>	<p>Amount of Each Disbursement This Period \$1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Mike Pence Committee P.O. Box 408 Anderson, IN 46015</p>	<p>Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) IN-02</p>	<p>Date (month, day, year) 9/13/00</p>	<p>Amount of Each Disbursement This Period \$1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Friends of Steve Carter 200 S. Meridian St. #400 Indianapolis, IN 46225</p>	<p>Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) IN-Any Gen.</p>	<p>Date (month, day, year) 9/14/00</p>	<p>Amount of Each Disbursement This Period \$1,000.00</p>
<p>H. Full Name, Mailing Address and ZIP Code Hancock County, GOP 24 N. State Street Greenfield, IN 46140</p>	<p>Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 9/14/00</p>	<p>Amount of Each Disbursement This Period \$500.00</p>
<p>I. Full Name, Mailing Address and ZIP Code G.A.T. PAC P.O. Box 3006 Dakton, VA 22124</p>	<p>Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 9/14/00</p>	<p>Amount of Each Disbursement This Period \$5,000.00</p>

SUBTOTAL of Disbursements This Page (optional)

\$12,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER
23

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Hoosier PAC

A. Full Name, Mailing Address and ZIP Code Mike Pence Comm Box 408 Anderson IN 46015	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) IN 2	Date (month, day, year) 5/25/00	Amount of Each Disbursement This Period \$ 1000.⁰⁰
B. Full Name, Mailing Address and ZIP Code Center for Constitutional 666 Broadway 7th Rights New York, NY 10012	Purpose of Disbursement Donation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/15/00	Amount of Each Disbursement This Period \$ 500.⁰⁰
C. Full Name, Mailing Address and ZIP Code Bailey for Life 2000 605 Buck Creek Valley Rd Corydon, IN 47112	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) IN 9	Date (month, day, year) 6/15/00	Amount of Each Disbursement This Period \$ 1000.⁰⁰
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2500

TOTAL This Period (last page this line number only)

